



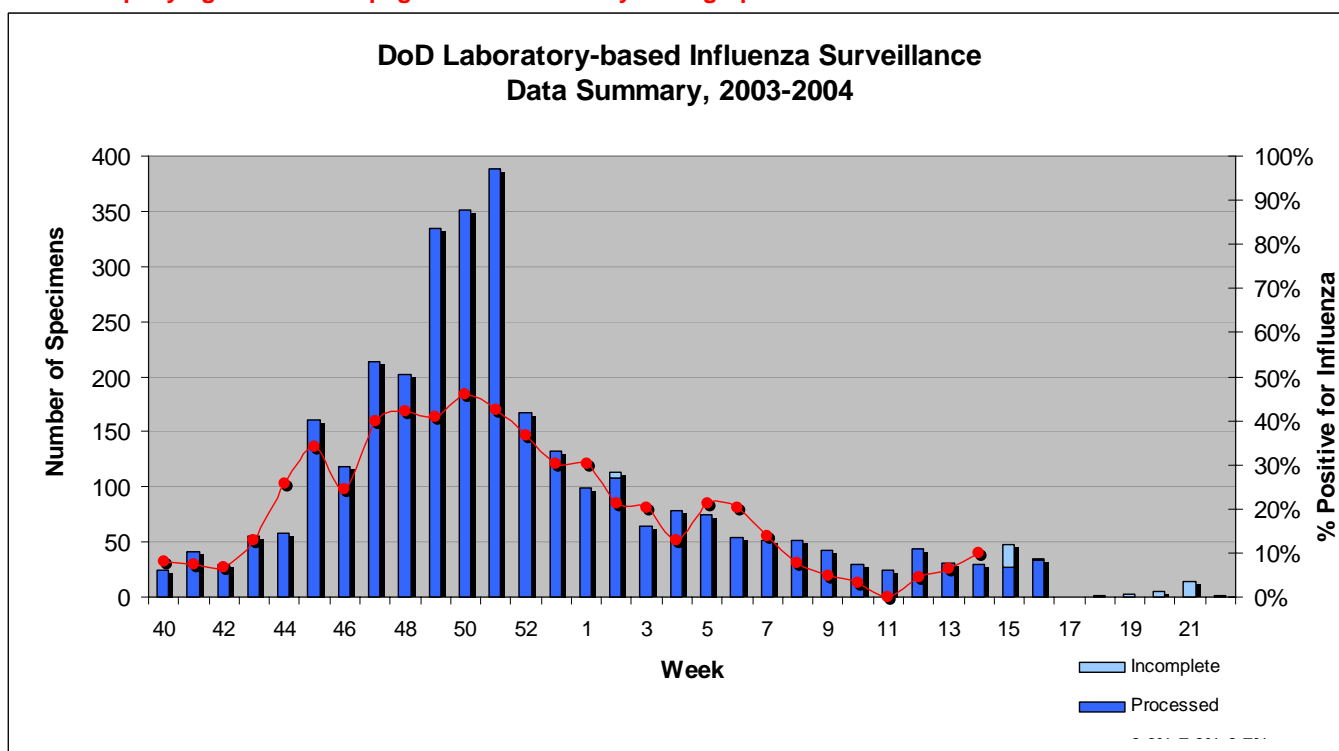
# DoD Global Influenza and Other Respiratory Viral Pathogens May 2004 Monthly Surveillance Report



**Note:** A batch of specimens was received from the NMRC-D site in Peru around mid-May, 46 of which tested positive for influenza. Of these, 41 were influenza B, possibly heralding a different makeup of the South American influenza season. Note that the specimens were collected over a period of time, and should not be interpreted as representing an outbreak of 46 influenza cases within a single week.

Number of identified isolates (**newly identified/cumulative**): **96/1064** (Influenza A=1009; Influenza B=55)

See accompanying table on last page for breakdown by demographics.



Graph contains preliminary data. Go to: <https://afioh.brooks.af.mil/pestilence/Influenza/> for more details.

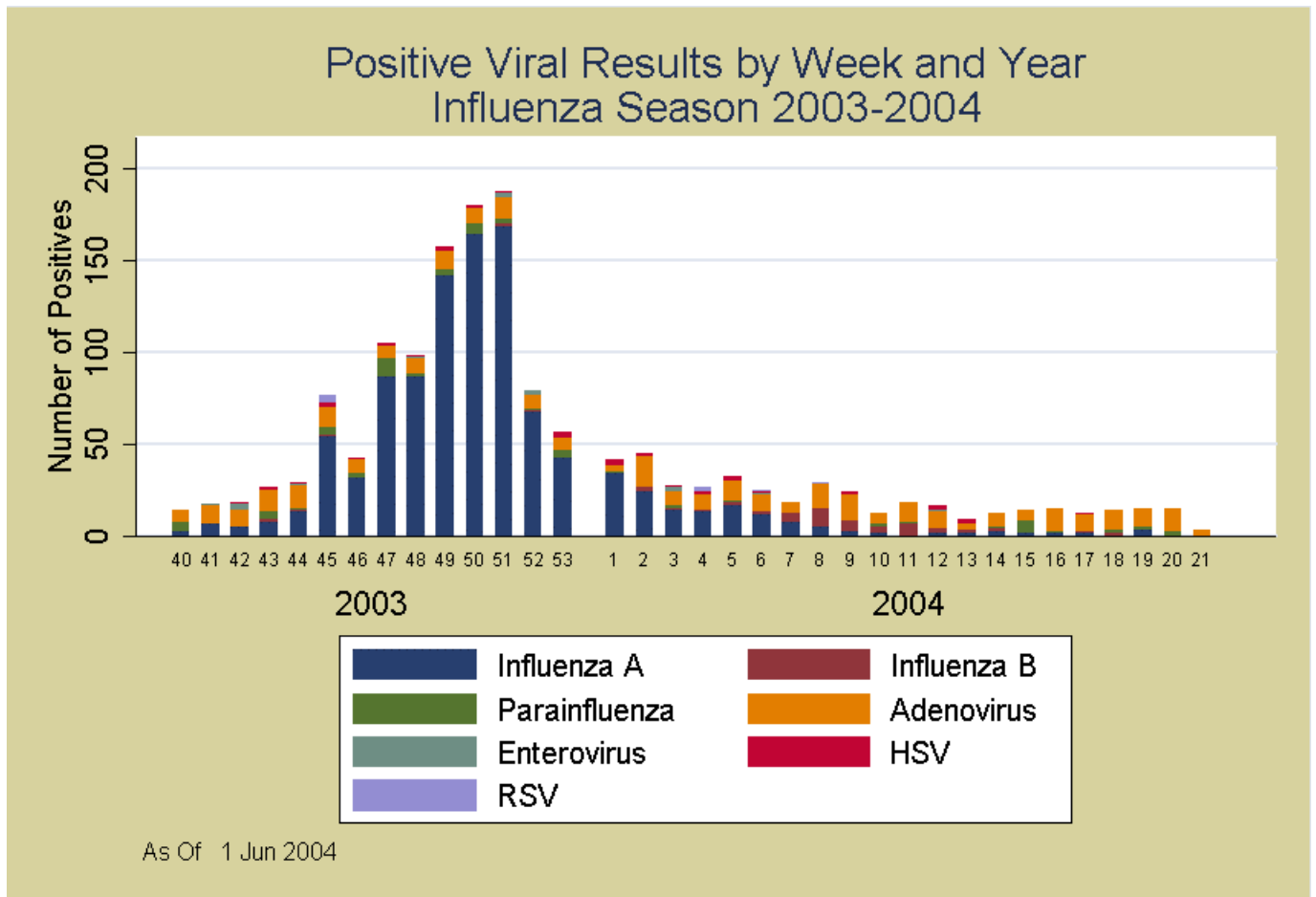
## SUMMARY:

Since the start of the influenza surveillance season (Week 40: 28 Sep to 4 Oct 03), the Epidemiological Surveillance Division (AFIOH/SDE) has received **3,611** throat swab specimens as part of the influenza surveillance program. 3,526 (97.6%) of the specimens have been processed to date. Of those processed, 1009 (28.6%) were positive for influenza A and 55 (1.6%) were positive for influenza B.

## SUBTYPING:

A total of 602 influenza isolates were subtyped. For influenza A, 554 (55% of all influenza A) of the isolates were subtyped; of these, 547 (99%) were H3N2, while 7 (1%) were H1N2. For influenza B, 47 isolates have been subtyped as B/Sichuan-like and one of the influenza B isolates has been subtyped as B/Hong Kong. Subtyping was accomplished by either polymerase chain reaction (PCR) or hemagglutination-inhibition (HI).

## Overall DoD Respiratory Viral Surveillance:



For Graphs by CDC Region, please see the end of this document.

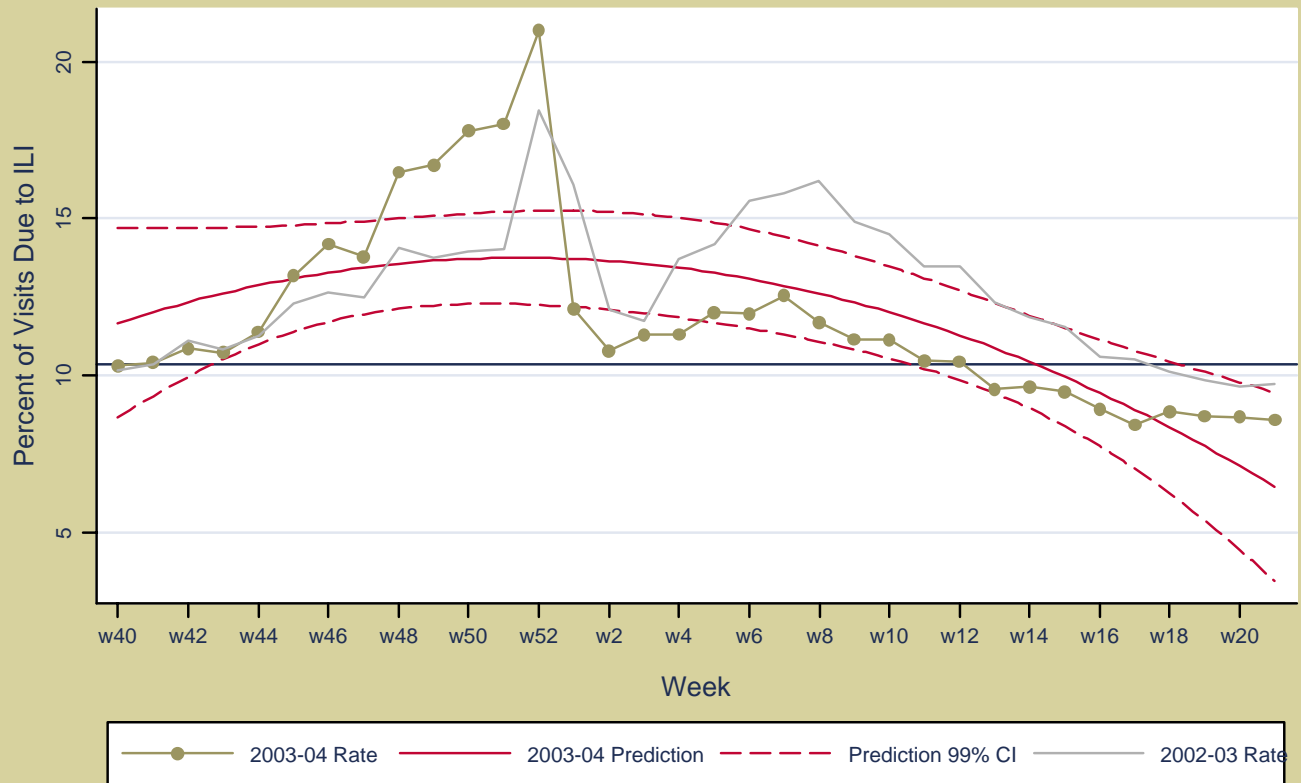
### Influenza-like Illness:

This graph plots the percentage of total outpatient visits that had an ILI diagnostic code assigned for each week. A predicted trend line and 99% confidence intervals are included. Data are plotted from the previous influenza season for comparison. The trend line shows the direction and magnitude of weekly ILI visits. The 99% confidence intervals indicate the range around the trend line in which visit rates would be expected to fall most of the time. When the actual ILI rate for any week is outside the 99% confidence interval, the results can be considered to be significantly different from what would be expected.

**(GRAPH ON NEXT PAGE)**

## ILI Rate -- Global Military Health System

As of: 7 Jun 2004



Note: Horizontal Line is Interseasonal Threshold

Additional regional graphs can be found on the AFIOH Influenza Surveillance website:

<https://gumbo.brooks.af.mil/pestilence/Influenza/ILChartsform.cfm>

### NATIONAL INFLUENZA ACTIVITY: CDC

<http://www.cdc.gov/ncidod/diseases/flu/weeklychoice.htm>

During week 20 (16 May -22 May; final CDC report for the 2003-2004 season), the World Health Organization (WHO) and National Respiratory and Enteric Virus Surveillance System (NREVSS) laboratories tested a total of 411 specimens for influenza viruses and one (0.2%) were positive for influenza A. The specimen was not subtyped.

### INTERNATIONAL INFLUENZA ACTIVITY: WHO

<http://www.who.int/GlobalAtlas/home.asp>

Week in review: **Week 22**

*South America:* Chile reported a widespread outbreak.

*Asia:* China reported sporadic activity.

*Europe:* Currently no activity.

*North America:* Currently no activity.

### ADDITIONAL INFORMATION:

- **SARS Update**

As more than 3 weeks have passed since the last case was placed in isolation in China's latest SARS outbreak, the WHO has declared that human-to-human transmission appears to have been broken. The number of SARS or probable SARS cases remains at 9. The most likely source of initial infection is the National Institute of Virology in Beijing, where research on SARS has been conducted. WHO experts and Chinese authorities continue to investigate procedures at the laboratory to determine how infection might have occurred and what steps could be taken to prevent any further incidents in the future. (from the WHO website)

**Table 2. Demographics for Influenza Isolates**

Demographics	New Identified		Cumulative (Season)	
AGE (years)	A	B	A	B
0-5	6	14	149	15
6-19	3	19	198	20
20-64	1	9	473	20
65 +	0	0	14	0
Unknown	3	0	175	0
<b>OVERALL TOTALS</b>	<b>13</b>	<b>42</b>	<b>1009</b>	<b>55</b>
STATUS	A	B	A	B
Military member/Sponsor	0	1	414	7
Spouse	0	0	137	1
Child	1	0	383	2
Other/Unknown	12	41	75	45
<b>OVERALL TOTALS</b>	<b>13</b>	<b>42</b>	<b>1009</b>	<b>55</b>
# POSITIVES SUBMITTED BY SENTINEL SITES (only)	A	B	A	B
Al Udeid AB, Qatar	14	0	15	0
Andersen AFB, Guam	2	0	28	0
Andrews AFB, MD	1	0	28	1
Aviano AB, Italy	0	0	9	0
Bremerton NS, WA	6	0	22	0
Elmendorf AFB, AK	0	0	24	0
Ganci AB, KYRG	0	0	7	0
Incirlik AB, Turkey	1	0	2	0
Kadena AB, Japan	0	0	4	1
Kunsan AB, Korea	9	1	16	3
CGS Ketchikan, AK	0	0	4	0
RAF Lakenheath, UK	0	0	38	0
NAB Little Creek, VA	-1*	0	89	0
Maxwell AFB, AL	0	0	14	0
McGuire AFB/FT. Dix, NJ	1	0	34	0
Misawa AB, Japan	2	0	13	0
Osan AB, Korea	0	0	31	2
NS Pearl Harbor/Hickam HI	0	0	23	0
Ramstein AB, Germany	0	0	24	0
NMC San Diego, CA	0	0	17	0
Sheppard AFB, TX	0	0	18	0

Travis AFB, CA	1	0	55	1
Tripler AMC, HI	16	0	69	2
US Air Force Academy, CO	0	0	64	0
Yokota AB, Japan	3	0	21	0
NH Yokosuka, Japan	1	0	3	0
<b>TOTALS for SENTINEL SITES</b>	<b>56</b>	<b>1</b>	<b>735</b>	<b>10</b>

\* This site was discovered to contain a duplicate entry in the database, hence one case was subtracted from the total, compare to the previous report.

**Table 3. Respiratory specimens received**

Location	Total # of Specimens Received	
	Current Month	Cumulative*
ALL SITES	193	3563
PACOM	28	456
EUCOM	4	219
CENTCOM	1	67
SOUTH AMERICA	106	387

Comments: \*Received since 28 September 2003.

**Table 4. Summary of Results of Recently Processed Specimens**

Location	Results of Specimens Processed since 1 May 2004*				
	Negative	Influenza A	Influenza B	Adenovirus	Other
ALL SITES	103	18	45	44	19**
PACOM	19	3	4	0	1
EUCOM	0	5	0	0	0
CENTCOM	1	0	0	0	0
SOUTH AMERICA	41	5	41	7	12

Comments: \* specimens were **received** in months of April and May

\*\* 20 parainfluenza, 9 HSV, 2 enterovirus

## Graphs of Isolates by CDC or Overseas Regions

Note: Only regions which displayed significant new activity in the last 4 weeks are shown.

